10-677-830 TISS QAS REVIEW SHEET. Serial # JACKET/ ISSUE CLASSIFICATION SHEET Yes O No O iya Primary Examiner box complete Issuing Classification complete PTO-892/1449 E O No E O Na Examiner's initials or cross-through lines supplied for each item cited by applican Oyes A Onot Oive Date(s) supplied/complete on all PTO 1449/892 sheets (Month and year required Brief description of drawings includes description of each figure in drawing Oyes Ond HIE Onya Continuing data mentioned in 1st paragraph (can be an insert CLAIMS Claims listed on Notice of Allowability match allowed claims and/or index of claims O. Claims correctly numbered in index. (No dublicate or missing claim numbers. And no incorrect dependencies One sheet of complete claim O. RAM FEES Amount that Shot Amount Actually Have Been Charg Examiner's amendment Check box if applicable CRFE-COMPUTER READABLE FORM If necessary (bilogical sequence listing) NOTICE OF ALLOWABILITY If drawing is present, either Box No. 3 (drawings accepted) of Box No. 6 (corrected drawing lequest) in INITIALED BIB SHEET Initialed Bib sheet is present REVIEWER COMMENTS

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